## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## May 01, 2006 8:00 am Secretary of State DOCUMENT # P96000057539 05-01-2006 90472 007 \*\*\*158.75 MIAMI URBAN REDEVELOPMENT CORPORATION. Principal Place of Business Mailing Address Eddowar -2700 NE 135TH ST 2700 NE 135TH ST MIAMI, FL 33181 MIAMI, FL 33181 04262006 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4 FEI Number Applied For 65-0679565 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BAUMANN, DONALD DO NOT WRITE 2700 NE 135TH ST # 45 IN THIS SPACE MIAMI, FL 33181 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE \_\_\_\_\_\_\_\_Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Added to Fees FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. OFFICERS AND DIRECTORS 10. TITLE BAUMANN, DONALD A JR. STREET ADDRESS 2700 NE 135TH ST #45 CITY-ST-ZIP MIAMI SHORES, FL 33150 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIF TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

**FILED**